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Bib Data Sheet

CONFIRMATION NO. 5618

<b>SERIAL NUMBER</b> 10/725,472	<b>FILING OR 371(c) DATE</b> 12/03/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> 67824.407422
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/179,373 06/26/2002  
which is a CIP of 10/035,045 01/03/2002 PAT 7,241,880  
and is a CIP of 09/897,427 07/03/2001 PAT 6,955,887  
and is a CIP of 09/799,629 03/07/2001 PAT 7,244,835

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 01/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 42	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

21967

## TITLE

RECOMBINANT METHODS FOR EXPRESSING A FUNCTIONAL SWEET (T1R2/T1R3) TASTE RECEPTOR

<b>FILING FEE RECEIVED</b> 1323	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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